Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Elicotive Goldber 1, 2pou										:		
		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS					2		ſ	RATE.	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/ minus 20=		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			4 minus 3 =		1			X40=		OR	X80=	80,00
MULTIPLE DEPENDENT CLAIM PRESENT						ಠ		+135=		OR	+270=	270,00
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	1,060.0
CLAIMS AS AMENDED - PART II								•		10	OTHER	THAN
		(Column 1)		(Colu		(Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	Ç,	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	T CLAIM		ŀ	+135=		OR	+270=	
								TOTAL			TOTAL	
			ADDIT. FEE	L		ADDIT. FEE						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER		HIGI NUN	mn 2) HEST MBER OUSLY	(Column 3) PRESENT EXTRA] [RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	<u> </u>	AMENDMENT			FOR		┧┟		FEE	i		FEE
	Total	*	Minus Minus	**		=	┨	X\$ 9=		OR	X\$18=	
	Independent		ENDEN	T CLAIM	- -	$\{\ \}$	X40=		OR	X80=		
<u> </u>							1	+135≃		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	·	(Column 1)	·		ımn 2)	(Column 3)	_					
AMENDMENT C	Jack State Control	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	╛╽	X\$ 9=	·	OR	X\$18=	
	Independent	*	Minus	***	IT OLD TO	=	4	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=	i i	1	7	1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	ine "Highest Nun	nder Previously Pa	aid For" (Total o	r inaepen	ident) is th	e nignest numb	er to	una in the ap	propriate bo	ox in c	olumn 1.	